

10/506877

DT04 Rec'd PCT/PTO 03 SEP 2004

Attorney Docket No. 56954 PCT (70207)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: PRESIDENT AND FELLOWS OF HARVARD COLLEGE
INT. APPLN. NO.: PCT/US03/07527
FILED: 11 March 2003
FOR: DETECTION AND QUANTIFICATION OF MODIFIED PROTEINS

CERTIFICATE OF EXPRESS MAILING

I hereby certify that the following Cover letter, Chapter II Demand, Fee Calculation Sheet and Check for \$662.00, are being deposited with the United States Postal Service in an envelope as "Express Mail Post Office to Addressee" under 37 C.F.R. 1.10, Mailing Label No. **EV 317952848 US**, with sufficient postage and addressed to MAIL STOP: PCT, Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.

October 14, 2003
Date


Crystal Slason

MAIL STOP: PCT
COMMISSIONER OF PATENTS
PO Box 1450
Alexandria, Virginia 22313-1450

LETTER ACCOMPANYING CHAPTER II DEMAND

Sir/Madam:

Applicants submit herewith the Chapter II Demand for the above-identified International Application, requesting that Chapter II of the PCT be entered. The requisite preliminary examination and handling fees are enclosed herewith.

EV317952848US

10:506877
DT04 Rec'd PCT/PTO 03 SEP 2004
Attorney Docket No. 56954 PCT (70207)
PCT/US03/07527

- 2 -

If any other information is required in this matter, the PTO is requested to contact the undersigned agent at the below-listed telephone number.

Respectfully submitted,

Dianne Rees
Dianne M. Rees, (Reg. No. 45,281)
EDWARDS & ANGELL, LLP
P.O. Box 9169
Boston, MA 02209
Telephone: 617-439-4444
Facsimile: 617-439-4170

Customer No.: 21874

BOS2_351319.1

The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are with the one chosen by the applicant, the full name or two-letter code of that Authority must be indicated by the applicant on the line IPEA/ US

PCT

CHAPTER II

DEMAND

under Article 31 of the Patent Cooperation Treaty:

The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty and hereby elects all eligible States (except where otherwise indicated).

For International Preliminary Examining Authority use only

Identification of IPEA		Date of receipt of DEMAND
Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION		Applicant's or agent's file reference 56954 PCT (70207)
International application No. PCT/US03/07527	International filing date (day/month/year) 11 March 2003 (11.03.2003)	(Earliest) Priority date (day/month/year) 11 March 2002 (11.03.2002)
Title of invention DETECTION AND QUANTIFICATION OF MODIFIED PROTEINS		
Box No. II APPLICANT(S)		
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) PRESIDENT AND FELLOWS OF HARVARD COLLEGE 17 Quincy Street Cambridge, Massachusetts 02138 USA		Telephone No. (617) 432-0923
		Facsimile No. (617) 432-2788
		Teleprinter No.
		Applicant's registration No. with the Office
State (that is, country) of nationality: USA	State (that is, country) of residence: USA	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) GYGI, Steven P. 4 Stockbridge Road Foxborough, Massachusetts 02035 USA		
State (that is, country) of nationality: USA	State (that is, country) of residence: USA	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) JUNMIN, Peng 32 Perthshire Road, Apt. 1 Brighton, Massachusetts 02135 USA		
State (that is, country) of nationality: China	State (that is, country) of residence: USA	
<input type="checkbox"/> Further applicants are indicated on a continuation sheet.		

Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The following person is agent common representative

and has been appointed earlier and represents the applicant(s) also for international preliminary examination.

is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.

is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.

Name and address: *(Family name followed by given name; for a legal entity, full official
The address must include postal code and name of country.)*

REES, Dianne M., Ph.D.
Edwards & Angell, LLP
PO Box 9169
Boston, Massachusetts 02209
USA

Telephone No.
(617) 439-4444

Faxsimile No.
(617) 439-4170

Teleprinter No.

Agent's registration No. with the Office

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION**Statement concerning amendments:***

1. The applicant wishes the international preliminary examination to start on the basis of:

the international application as originally filed

the description as originally filed
 as amended under Article 34

the claims as originally filed
 as amended under Article 19 (together with any accompanying statement)
 as amended under Article 34

the drawings as originally filed
 as amended under Article 34

2. The applicant wishes any amendment to the claims under Article 19 to be considered as reversed.

3. The applicant wishes the start of the international preliminary examination to be postponed until the expiration of 20 months from the priority date unless the International Preliminary Examining Authority receives a copy of any amendments made under Article 19 or a notice from the applicant that he does not wish to make such amendments (Rule 69.1(d)). *(This check-box may be marked only where the time limit under Article 19 has not yet expired.)*

* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

Language for the purposes of international preliminary examination: English

which is the language in which the international application was filed.
 which is the language of a translation furnished for the purposes of international search.
 which is the language of publication of the international application.
 which is the language of the translation (to be) furnished for the purposes of international preliminary examination.

Box No. V ELECTION OF STATES

The applicant hereby elects all eligible States *(that is, all States which have been designated and which are bound by Chapter II of the PCT)*

excluding the following States which the applicant wishes not to elect:

Box No. VI CHECK LIST

The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:

			For International Preliminary Examining Authority use only	
			received	not received
1. translation of international application	:	sheets	<input type="checkbox"/>	<input type="checkbox"/>
2. amendments under Article 34	:	sheets	<input type="checkbox"/>	<input type="checkbox"/>
3. copy (or, where required, translation) of amendments under Article 19	:	sheets	<input type="checkbox"/>	<input type="checkbox"/>
4. copy (or, where required, translation) of statement under Article 19	:	sheets	<input type="checkbox"/>	<input type="checkbox"/>
5. letter	:	2 sheets	<input type="checkbox"/>	<input type="checkbox"/>
6. other (specify)	:	sheets	<input type="checkbox"/>	<input type="checkbox"/>

The demand is also accompanied by the item(s) marked below:

1. <input checked="" type="checkbox"/> fee calculation sheet	5. <input type="checkbox"/> statement explaining lack of signature
2. <input type="checkbox"/> original separate power of attorney	6. <input type="checkbox"/> sequence listings in computer readable form
3. <input type="checkbox"/> original general power of attorney	7. <input type="checkbox"/> tables in computer readable form related to sequence listings
4. <input type="checkbox"/> copy of general power of attorney; reference number, if any:	8. <input type="checkbox"/> other (specify):

Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).


Dianne M. Rees, Ph.D.
Registration No.: 45,281

For International Preliminary Examining Authority use only

1. Date of actual receipt of DEMAND:
2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):
3. The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply. The applicant has been informed accordingly.
4. The date of receipt of the demand is WITHIN the period of 19 months from the priority date as extended by virtue of Rule 80.5.
5. Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

For International Bureau use only

Demand received from IPEA on:

PCT

FEE CALCULATION SHEET

Annex to the Demand

International application No.	PCT/US03/07527	For International Preliminary Examining Authority use only
Applicant's or agent's file reference	56954 PCT (70207)	Date stamp of the IPEA
Applicant PRESIDENT AND FELLOWS OF HARVARD COLLEGE		
CALCULATION OF PRESCRIBED FEES		
1. Preliminary examination fee	490.00	P
2. Handling fee (<i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i>)	172.00	H
3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box	662.00	TOTAL
MODE OF PAYMENT		
<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input type="checkbox"/> cash	
<input checked="" type="checkbox"/> cheque	<input type="checkbox"/> revenue stamps	
<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons	
<input type="checkbox"/> bank draft	<input type="checkbox"/> other (<i>specify</i>):	

AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT <i>(This mode of payment may not be available at all IPEAs)</i>	
<input type="checkbox"/> Authorization to charge the total fees indicated above.	IPEA/ <u>USA</u>
<input checked="" type="checkbox"/> (<i>This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit</i>) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.	Deposit Account No.: <u>04-1105</u>
	Date: <u>October 14, 2003</u>
	Name: <u>Dianne M. Rees, Ph.D.</u>
	Signature: <u>Dianne Rees</u>